

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	6m	06-25-01	
FORMALITY REVIEW	S.B	JG 3015	C7-20-C1
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE CO:

Claim	Final Original	Date
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4	✓	6/27/02
5		12/2/02
6		7/15/02
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18	✓	
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23	✓	
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50	✓	

Claim	Final Original	Date
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53		7/15/02
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If more than 150 claims or 10 actions  
staple additional sheet here

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